RAS OFFICERS' INSTITUTE

MEMBERSHIP FORM

FAMILY ATMOSPHERE (WITH THE CLASS OF JAIPUR) / SWIMMING POOL / FITNESS (STATE OF THE ART GYM) / WELLNESS (SPA, SAUNA, STEAM, MEDITATION) / GREAT DINING (MULTI CUISINE RESTAURANT) / INDOOR GAMES (POOL, CARROM, TT, CARD ROOM) / 24 HOURS COFFEE SHOP /

CONFERENCE HALLS / BANQUETS / SUITES / AC ROOMS / AMPLE PARKING

R.A.S
OFFICERS INSTITUTE

RAS OFFICERS' INSTITUTE
REGISTERED OFFICE AT 2, INSTITUTIONAL AREA, NEAR DAINIK BHASKAR, JLN MARG, JAIPUR
Terms & Conditions

I/We........................................................................................................on this......day of......,20......do hereby execute this undertaking in favour of “RAS OFFICER'S INSTITUTE” an Institute managed by “RAJASTHAN PRASHASNIK SEVA PARISHAD” being a society incorporated under the provisions of The Rajasthan Societies Registration Act, 1958 and having its Registered Office at 2, Institutional Area, Near Dainik Bhaskar, JLN Marg, Jaipur, (“Society”) and undertake as under:

1. That I/We am/are desirous of obtaining individual/corporate membership of the elite “RAS OFFICER'S INSTITUTE” and in pursuance of the same have submitted an application form along with application fees in favour of “RAJASTHAN PRASHASNIK SEVA PARISHAD” at the office of “RAS OFFICER'S INSTITUTE” situated at 2, Institutional Area, Near Dainik Bhaskar, JLN Marg, Jaipur.

2. That I/We are well conversant of the fact that the “RAS OFFICER'S INSTITUTE” is an Institute managed by the “RAJASTHAN PRASHASNIK SEVA PARISHAD” and as such the management comprises of senior administrative officials. So, I/We hereby declare that I/We shall maintain discipline, dignity and etiquettes of the highest order.

3. Accordingly, we agree to the rule that all the designated posts in the management shall be filled by serving RAS officers only. We shall neither make any claim to the contrary in this regard nor dispute any such nomination.

4. That I/We hereby declare that I/We bear good moral character and reputation. I/We recognize the importance of becoming part of an organisation which has public welfare as its core aim and sincerely intend rendering personal service to my community in cooperation with other civic minded persons.

5. That I/We have fully read and understood the rules and regulations of “RAS OFFICER'S INSTITUTE” available at the office of “RAS OFFICER'S INSTITUTE” situated at 2, Institutional Area, Near Dainik Bhaskar, JLN Marg, Jaipur (hereinafter referred to as the “Rules and Regulations”).

6. That I/We have sought all explanations and clarifications from the management in respect of “RAS OFFICER'S INSTITUTE” about the Rules and Regulations and I/We am/are completely satisfied with all such explanations and clarifications.
7. That I/We am/are aware that the management of “RAS OFFICER'S INSTITUTE” has the absolute right to accept or conditionally accept or reject my / our application without giving any reason and I/we shall not challenge the decision of the management.

8. That I/we understand that my/our membership shall be effective from the date of issuance of an express communication by the management of “RAS OFFICER'S INSTITUTE” to me/us in this regard.

9. That I/we am/are aware that “RAS OFFICER'S INSTITUTE” is a society which is completely managed by the "The Rajasthan Societies Registration Act, 1958" and the grant of membership of “RAS OFFICER'S INSTITUTE” by the management refers merely to a ‘service provider-customer’ relationship and does not give me/us any rights and or interest in the ownership or management of the society or property.

10. That I/We assure the management of “RAS OFFICER'S INSTITUTE” that in the event of addition/amendment/deletion of any Rules & Regulations/Amenities, I/We shall accept the decision of the management and shall not dispute or challenge such addition/amendment/deletion.

11. That I/We assure that I/We have not been convicted of any offence involving moral turpitude.

12. That I/We am/ are aware that the “RAS OFFICER'S INSTITUTE” is located on the land owned by RAS Association, a society incorporated under the provisions of the Societies Registration Act, 1958 and having its registered Office at 2, Institutional Area, Near Dainik Bhaskar, JLN Marg, Jaipur which has granted the permission of use to the Institute.

13. That I/We am/are giving this undertaking in order to affirm my/our commitments and obligations mentioned in Rules and Regulations.

14. That I/We hereby agree and undertake to abide by all the terms and condition of the Rules and regulations and this undertaking. In the event of my/our failure to abide by terms of the Rules and Regulations and / or this undertaking, the Society shall be entitled to take such actions against me/us as it is entitled to under the Rules and Regulations.

.................................
(Signature)
RAS OFFICERS' INSTITUTE – MEMBERSHIP FORM

Thank you.

This membership application is made on this Day .......... Month ....... Year .......... 

Principal member (Mr./Ms.) .................................................................
(First Name) (Middle Name) (Last Name) 

Father’s Name/Spouse Name (Mr./Ms.) .................................................................
(First Name) (Middle Name) (Last Name) 

Date of Birth .................................. Date of Anniversary ..................................
(DD/MM/YYYY) (DD/MM/YYYY) 

Blood Group .................................. Nationality........................................

Residential Address ................................................................. 

................................................................. 

Pin Code ............... Landline no. ............... Mobile No. .....................

Permanent Address ................................................................. 

................................................................. 

Pin Code ............... Landline no ............... Mobile No .....................

Personal E-Mail ID ...............@........... PAN No.....................

Educational Qualification ................................................................. 

Professional Details: Business/Professional/Service ................................................................. 

Name of Firm/profession/institution. ................................................................. 

Designation ................................................................. 

Office Address ................................................................. 

................................................................. 

Pin Code ............... Landline no ............... Mobile No .....................

Please Affix your Recent Passport Size Photograph
RAS OFFICERS' INSTITUTE-MEMBERSHIP FORM

Do you have any business in which you have substantial interest? Own any brand/is a registered licensee of any brand? If yes, Give Details

Preferred Mailing Address (Tick any one) - Residential / Permanent / Business

Whether the applicant is a member of any other Institute/club? If yes, give reasons

Whether the applicant’s membership at any other Institute has been terminated by that Institute if yes, give reasons

Whether the applicant’s membership at “RAS OFFICERS’ INSTITUTE” has been rejected earlier? If yes, give reasons

Hobbies and activities the candidate would like to participate or enjoy

RAS OFFICER'S INSTITUTE
Membership Details of Add-On Members

Spouse Details
Name (Mr./Ms.) ................................................................. (First Name) (Middle Name) (Last Name)
Date of Birth................................. Blood Group ......................... (DD/MM/YYYY)
Sex (Tick one) MALE / FEMALE Relationship to Principal Member .........................
Residential Address .................................................................
Pin Code ...................... Landline no. ......................... Mobile No..............................

(Signature)
## RAS Officers' Institute-Membership Form

<table>
<thead>
<tr>
<th>Details</th>
<th>Below the age of 18 years</th>
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<tbody>
<tr>
<td><strong>Child - 1 Details</strong></td>
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<tr>
<td><strong>Name (Mr./Miss.)</strong></td>
<td>.................................................................</td>
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<tr>
<td>(First Name)</td>
<td>(Middle Name)</td>
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<tr>
<td><strong>Date of Birth</strong></td>
<td>(DD/MM/YYYY)</td>
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<td><strong>Sex</strong></td>
<td>MALE / FEMALE</td>
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<td><strong>Child - 2 Details</strong></td>
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<tr>
<td><strong>Name (Mr./Miss.)</strong></td>
<td>.................................................................</td>
</tr>
<tr>
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</table>

**Proposer Details**

1. **Name of the RAS Officer** | ................................................................. |
| **I-Card no.** | **Mobile no.** |

2. **Name of the RAS Officer** | ................................................................. |
| **I-Card no.** | **Mobile no.** |

Please Affix Recent Passport Size Photograph

Please Affix Recent Passport Size Photograph